

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

ALAMEDA COUNTY TREASURER
1221 OAK ST

OAKLAND

CA 94612

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 2,706,457.43

Gross Claim \$2,706,457.43

Net Claim / Payment Amount \$2,706,457.43

YTD Amount: \$12,580,316.94

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

ALPINE COUNTY TREASURER
PO BOX 217

MARKLEEVILLE

CA 96120

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 68,997.54

Gross Claim \$68,997.54

Net Claim / Payment Amount \$68,997.54

YTD Amount: \$320,718.51

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

AMADOR COUNTY TREASURER
810 COURT ST

JACKSON

CA 95642

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 124,199.21

Gross Claim \$124,199.21

Net Claim / Payment Amount \$124,199.21

YTD Amount: \$577,310.18

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

BERKELEY CITY TREASURER
2081 CENTER STREET

BERKELEY CA 94704

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 **To** 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 229,317.80

Gross Claim **\$229,317.80**

Net Claim / Payment Amount **\$229,317.80**

YTD Amount: **\$1,065,928.67**

For assistance, please call: John Bodolay at (916) 323-2154

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P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

BUTTE COUNTY TREASURER
25 COUNTY CENTER DR

OROVILLE

CA 95965

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 **To** 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 442,666.35

Gross Claim **\$442,666.35**

Net Claim / Payment Amount **\$442,666.35**

YTD Amount: **\$2,057,628.15**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

CALAVERAS COUNTY TREASURER
GOVERNMENT CENTER

SAN ANDREAS

CA 95249

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 **To** 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 134,294.40

Gross Claim **\$134,294.40**

Net Claim / Payment Amount **\$134,294.40**

YTD Amount: **\$624,235.25**

For assistance, please call: John Bodolay at (916) 323-2154

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P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

COLUSA COUNTY TREASURER
546 JAY ST

COLUSA

CA 95932

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 111,830.81

Gross Claim **\$111,830.81**

Net Claim / Payment Amount **\$111,830.81**

YTD Amount: **\$519,818.63**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

CONTRA COSTA COUNTY TREASURER
625 COURT ST RM 102

MARTINEZ

CA 94553

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,719,226.46

Gross Claim \$1,719,226.46

Net Claim / Payment Amount \$1,719,226.46

YTD Amount: \$7,991,411.05

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

DEL NORTE COUNTY TREASURER
981 H ST STE 150

CRESCENT CITY CA 95531

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 117,712.42

Gross Claim \$117,712.42

Net Claim / Payment Amount \$117,712.42

YTD Amount: \$547,157.89

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

EL DORADO COUNTY TREASURER
360 FAIR LN

PLACERVILLE

CA 95667

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 307,657.84

Gross Claim **\$307,657.84**

Net Claim / Payment Amount **\$307,657.84**

YTD Amount: **\$1,430,073.51**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

FRESNO COUNTY TREASURER
PO BOX 1406

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,861,559.95

Gross Claim \$1,861,559.95

Net Claim / Payment Amount \$1,861,559.95

YTD Amount: \$8,653,014.05

For assistance, please call: John Bodolay at (916) 323-2154

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P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

GLENN COUNTY TREASURER
516 WEST SYCAMORE STREET

WILLOWS

CA 95988

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 118,348.62

Gross Claim \$118,348.62

Net Claim / Payment Amount \$118,348.62

YTD Amount: \$550,115.10

For assistance, please call: John Bodolay at (916) 323-2154

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P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

HUMBOLDT COUNTY TREASURER
825 FIFTH ST RM 125

EUREKA

CA 95501

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 273,019.49

Gross Claim \$273,019.49

Net Claim / Payment Amount \$273,019.49

YTD Amount: \$1,269,065.50

For assistance, please call: John Bodolay at (916) 323-2154

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P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A

PAYMENT ISSUE DATE: 11/15/2013

IMPERIAL COUNTY TREASURER

940 WEST MAIN ST

EL CENTRO

CA 92243 2863

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 376,128.12

Gross Claim \$376,128.12

Net Claim / Payment Amount \$376,128.12

YTD Amount: \$1,748,341.16

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A

PAYMENT ISSUE DATE: 11/15/2013

INYO COUNTY TREASURER

PO BOX 0

INDEPENDENCE

CA 93526

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 79,822.74

Gross Claim \$79,822.74

Net Claim / Payment Amount \$79,822.74

YTD Amount: \$371,036.81

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A

PAYMENT ISSUE DATE: 11/15/2013

KERN COUNTY TREASURER

PO BOX 981240

SACRAMENTO

CA 95798 1240

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,606,604.38

Gross Claim \$1,606,604.38

Net Claim / Payment Amount \$1,606,604.38

YTD Amount: \$7,467,914.36

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A

PAYMENT ISSUE DATE: 11/15/2013

KINGS COUNTY TREASURER

PO BOX 1406

SACRAMENTO

CA 95812 1406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 316,061.54

Gross Claim \$316,061.54

Net Claim / Payment Amount \$316,061.54

YTD Amount: \$1,469,136.13

For assistance, please call: John Bodolay at (916) 323-2154

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P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

LAKE COUNTY TREASURER
255 NORTH FORBES ST RM 215

LAKEPORT

CA 95453

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 156,587.79

Gross Claim \$156,587.79

Net Claim / Payment Amount \$156,587.79

YTD Amount: \$727,860.71

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

LASSEN COUNTY TREASURER
COUNTY COURTHOUSE RM 103

SUSANVILLE

CA 96130

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 117,898.51

Gross Claim \$117,898.51

Net Claim / Payment Amount \$117,898.51

YTD Amount: \$548,022.89

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A

PAYMENT ISSUE DATE: 11/15/2013

LOS ANGELES COUNTY TREASURER

PO BOX 1859

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 21,610,249.13

Gross Claim **\$21,610,249.13**

Net Claim / Payment Amount **\$21,610,249.13**

YTD Amount: **\$100,450,049.51**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A

PAYMENT ISSUE DATE: 11/15/2013

MADERA COUNTY TREASURER

C/O BANK OF AMERICA

PO BOX 1859

SACRAMENTO

CA 95812 1859

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 **To** 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 331,029.96

Gross Claim **\$331,029.96**

Net Claim / Payment Amount **\$331,029.96**

YTD Amount: **\$1,538,713.22**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

MARIN COUNTY TREASURER

PO BOX 4220
CIVIC CENTER
SAN RAFAEL

CA 94913

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 **To** 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 428,853.83

Gross Claim **\$428,853.83**

Net Claim / Payment Amount **\$428,853.83**

YTD Amount: **\$1,993,423.98**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

MARIPOSA COUNTY TREASURER
PO BOX 36

MARIPOSA CA 95338

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 80,435.48

Gross Claim \$80,435.48

Net Claim / Payment Amount \$80,435.48

YTD Amount: \$373,885.01

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

MENDOCINO COUNTY TREASURER
501 LOW GAP RD 1060

UKIAH

CA 95482

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 **To** 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 190,504.45

Gross Claim **\$190,504.45**

Net Claim / Payment Amount **\$190,504.45**

YTD Amount: **\$885,514.17**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

MERCED COUNTY TREASURER
PO BOX 981311

WEST SACRAMENTO CA 95798 1311

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 556,987.48

Gross Claim \$556,987.48

Net Claim / Payment Amount \$556,987.48

YTD Amount: \$2,589,022.45

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

MODOC COUNTY TREASURER
204 COURT ST RM 101

ALTURAS

CA 96101

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 **To** 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 75,011.54

Gross Claim **\$75,011.54**

Net Claim / Payment Amount **\$75,011.54**

YTD Amount: **\$348,673.12**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A

PAYMENT ISSUE DATE: 11/15/2013

MONO COUNTY TREASURER

PO BOX 495

BRIDGEPORT

CA 93517

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 78,231.86

Gross Claim \$78,231.86

Net Claim / Payment Amount \$78,231.86

YTD Amount: \$363,642.02

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A

PAYMENT ISSUE DATE: 11/15/2013

MONTEREY COUNTY TREASURER

PO BOX 1406

SACRAMENTO

CA 95812 1406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 887,148.25

Gross Claim \$887,148.25

Net Claim / Payment Amount \$887,148.25

YTD Amount: \$4,123,695.45

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A

PAYMENT ISSUE DATE: 11/15/2013

NAPA COUNTY TREASURER

1195 THIRD ST RM 108

NAPA

CA 94559 3035

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 **To** 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 254,861.77

Gross Claim **\$254,861.77**

Net Claim / Payment Amount **\$254,861.77**

YTD Amount: **\$1,184,663.68**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

NEVADA COUNTY TREASURER
PO BOX 128

NEVADA CITY

CA 95959

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 208,599.39

Gross Claim \$208,599.39

Net Claim / Payment Amount \$208,599.39

YTD Amount: \$969,624.14

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

ORANGE COUNTY TREASURER
PO BOX 981024

WEST SACRAMENTO CA 95798 1024

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 6,149,503.69

Gross Claim \$6,149,503.69

Net Claim / Payment Amount \$6,149,503.69

YTD Amount: \$28,584,490.01

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A

PAYMENT ISSUE DATE: 11/15/2013

PLACER COUNTY TREASURER

2976 Richardson Dr.

Auburn

CA 95603

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 **To** 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 516,528.80

Gross Claim **\$516,528.80**

Net Claim / Payment Amount **\$516,528.80**

YTD Amount: **\$2,400,960.01**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

PLUMAS COUNTY TREASURER
PO BOX 176

QUINCY

CA 95971

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 108,361.60

Gross Claim \$108,361.60

Net Claim / Payment Amount \$108,361.60

YTD Amount: \$503,692.86

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

RIVERSIDE COUNTY TREASURER

C/O UNION BANK OF CA ST GOV

PO BOX 4035

SACRAMENTO

CA 95812 4035

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 **To** 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 3,944,344.15

Gross Claim **\$3,944,344.15**

Net Claim / Payment Amount **\$3,944,344.15**

YTD Amount: **\$18,334,335.85**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A

PAYMENT ISSUE DATE: 11/15/2013

SACRAMENTO COUNTY TREASURER

PO BOX 980264

WEST SACRAMENTO

CA 95798 0264

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 2,431,148.84

Gross Claim **\$2,431,148.84**

Net Claim / Payment Amount **\$2,431,148.84**

YTD Amount: **\$11,300,611.11**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

SAN BENITO COUNTY TREASURER

COURTHOUSE
440 FIFTH ST RM 107
HOLLISTER

CA 95023

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 **To** 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 151,225.88

Gross Claim **\$151,225.88**

Net Claim / Payment Amount **\$151,225.88**

YTD Amount: **\$702,937.16**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

SAN BERNARDINO CO TREASURER
PO BOX 1859

SACRAMENTO CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 3,992,259.42

Gross Claim \$3,992,259.42

Net Claim / Payment Amount \$3,992,259.42

YTD Amount: \$18,557,058.50

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A

PAYMENT ISSUE DATE: 11/15/2013

SAN DIEGO COUNTY TREASURER

PO BOX 980304

WEST SACRAMENTO

CA 95798 0304

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 **To** 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 6,199,941.06

Gross Claim \$6,199,941.06

Net Claim / Payment Amount \$6,199,941.06

YTD Amount: \$28,818,936.02

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

SAN FRANCISCO COUNTY TREASURER

PO BOX 2920

SACRAMENTO

CA 95814 2920

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,404,553.81

Gross Claim \$1,404,553.81

Net Claim / Payment Amount \$1,404,553.81

YTD Amount: \$6,528,730.85

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

SAN JOAQUIN COUNTY TREASURER
PO BOX 981355

WEST SACRAMENTO CA 95798 1355

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 **To** 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,277,910.42

Gross Claim **\$1,277,910.42**

Net Claim / Payment Amount **\$1,277,910.42**

YTD Amount: **\$5,940,059.49**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A

PAYMENT ISSUE DATE: 11/15/2013

SAN LUIS OBISPO COUNTY TREASURER

PO BOX 1149

SAN LUIS OBISPO

CA 93406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 515,458.39

Gross Claim \$515,458.39

Net Claim / Payment Amount \$515,458.39

YTD Amount: \$2,395,984.44

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

SAN MATEO COUNTY TREASURER

C/O UNION BANK ST GOVT DEPT

PO BOX 4035

Sacramento

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 **To** 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,234,372.12

Gross Claim **\$1,234,372.12**

Net Claim / Payment Amount **\$1,234,372.12**

YTD Amount: **\$5,737,682.17**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

SANTA BARBARA COUNTY TREASURER
PO BOX 579

SANTA BARBARA CA 93102

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 878,643.18

Gross Claim \$878,643.18

Net Claim / Payment Amount \$878,643.18

YTD Amount: \$4,084,161.65

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

SANTA CLARA CO TREASURER
PO BOX 1406

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 3,477,251.14

Gross Claim \$3,477,251.14

Net Claim / Payment Amount \$3,477,251.14

YTD Amount: \$16,163,166.25

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

SANTA CRUZ COUNTY TREASURER
PO BOX 1817

SANTA CRUZ CA 95061

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 558,407.39

Gross Claim \$558,407.39

Net Claim / Payment Amount \$558,407.39

YTD Amount: \$2,595,622.56

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A

PAYMENT ISSUE DATE: 11/15/2013

SHASTA COUNTY TREASURER

PO BOX 1859

SACRAMENTO

CA 95812 1859

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 367,243.29

Gross Claim \$367,243.29

Net Claim / Payment Amount \$367,243.29

YTD Amount: \$1,707,042.17

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A

PAYMENT ISSUE DATE: 11/15/2013

SIERRA COUNTY TREASURER

PO BOX 376

DOWNIEVILLE

CA 95936 0376

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 70,487.81

Gross Claim \$70,487.81

Net Claim / Payment Amount \$70,487.81

YTD Amount: \$327,645.63

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

SISKIYOU COUNTY TREASURER
311 FOURTH ST RM 104

YREKA

CA 96097

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 131,019.61

Gross Claim \$131,019.61

Net Claim / Payment Amount \$131,019.61

YTD Amount: \$609,013.18

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A

PAYMENT ISSUE DATE: 11/15/2013

SOLANO COUNTY T TC

675 TEXAS ST STE 1900

FAIRFIELD

CA 94533 6337

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 **To** 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 765,710.94

Gross Claim **\$765,710.94**

Net Claim / Payment Amount **\$765,710.94**

YTD Amount: **\$3,559,223.27**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A

PAYMENT ISSUE DATE: 11/15/2013

SONOMA COUNTY TREASURER

PO BOX 1204

SACRAMENTO

CA 95812 1204

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 860,354.58

Gross Claim \$860,354.58

Net Claim / Payment Amount \$860,354.58

YTD Amount: \$3,999,151.51

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

STANISLAUS COUNTY TREASURER
PO BOX 3052

MODESTO

CA 95353 3052

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 975,156.83

Gross Claim \$975,156.83

Net Claim / Payment Amount \$975,156.83

YTD Amount: \$4,532,782.17

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A

PAYMENT ISSUE DATE: 11/15/2013

SUTTER COUNTY TREASURER

PO BOX 546

YUBA CITY

CA 95992

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 361,640.82

Gross Claim \$361,640.82

Net Claim / Payment Amount \$361,640.82

YTD Amount: \$1,681,000.43

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

TEHAMA COUNTY TREASURER
PO BOX 1150

RED BLUFF

CA 96080

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 151,784.16

Gross Claim \$151,784.16

Net Claim / Payment Amount \$151,784.16

YTD Amount: \$705,532.19

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

TRI CITY MENTAL HEALTH
2008 N GAREY AVENUE

POMONA

CA 91767

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 421,730.84

Gross Claim **\$421,730.84**

Net Claim / Payment Amount **\$421,730.84**

YTD Amount: **\$1,960,314.47**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A

PAYMENT ISSUE DATE: 11/15/2013

TRINITY CO TREASURER

PO BOX 1297

WEAVERVILLE

CA 96093 1297

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 77,936.84

Gross Claim \$77,936.84

Net Claim / Payment Amount \$77,936.84

YTD Amount: \$362,270.66

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A

PAYMENT ISSUE DATE: 11/15/2013

TULARE COUNTY TREASURER
COUNTY CIVIC CENTER RM 103E
221 SOUTH MOONEY BL
VISALIA

CA 93291

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 **To** 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 923,299.55

Gross Claim **\$923,299.55**

Net Claim / Payment Amount **\$923,299.55**

YTD Amount: **\$4,291,736.06**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

TUOLUMNE COUNTY TREASURER
2 SOUTH GREEN ST

SONORA

CA 95370

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 145,049.24

Gross Claim \$145,049.24

Net Claim / Payment Amount \$145,049.24

YTD Amount: \$674,226.55

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A

PAYMENT ISSUE DATE: 11/15/2013

VENTURA COUNTY TREASURER

C/O WELLS FARGO BANK

PO BOX 980307

WEST SACRAMENTO

CA 95798 0307

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 **To** 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,575,062.30

Gross Claim **\$1,575,062.30**

Net Claim / Payment Amount **\$1,575,062.30**

YTD Amount: **\$7,321,298.58**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1300112A
PAYMENT ISSUE DATE: 11/15/2013

YOLO COUNTY TREASURER
PO BOX 1995

WOODLAND

CA 95695

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2013

Collection Period: 10/01/2013 To 10/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 411,046.36

Gross Claim \$411,046.36

Net Claim / Payment Amount \$411,046.36

YTD Amount: \$1,910,650.19

For assistance, please call: John Bodolay at (916) 323-2154

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